

COMBINED DECLARATION AND POWER OF ATTORNEY
IN ORIGINAL APPLICATION

As a below named inventor, I , hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and joint inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

POSITIVE DISPLACEMENT FLUSH SYRINGE

the specification of which was filed in the U.S. Patent and Trademark Office on January 7, 2005, and was accorded International application Serial No. PCT/US05/00624, and is the same as was reviewed and verified in this declaration.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the patentability of this application in accordance with Title 37, Code of Federal Regulations, §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

I hereby claim the benefit under Title 35, United States Code §119(e) of any United States provisional application(s) listed: **60/535,557 filed on January 9, 2004.**

I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56 which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

26253

Address all telephone calls to **Jeanne P. Lukasavage** at telephone number (201) 847-6797.

Address all correspondence to David W. Highet, Esq., Becton Dickinson and Company, 1 Becton Drive, Franklin Lakes, New Jersey 07417-1880.

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

FULL NAME OF FIRST INVENTOR	
Anthony J. Kosinski	
FIRST INVENTOR'S SIGNATURE	DATE:
<i>Anthony J. Kosinski</i>	3/26/07
RESIDENCE	
79 Princeton Drive New Providence, New Jersey 07974 U.S.A.	
CITIZENSHIP	
U.S.A.	
POST OFFICE ADDRESS	
79 Princeton Drive New Providence, New Jersey 07974 U.S.A.	

- * Before signing this declaration each person signing must:
1. Review the declaration and verify the correctness of all information therein; and
 2. Review the specification and the claims, including any amendments made to the claims.